

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	10		2/24
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		64930	3-28

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1			02/16/02
2			02/16/02
3			02/16/02
4			03/31/02
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19	N		
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29			
30			
31			
32	✓	✓	✓
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Claim	Final	Original	Date
51	✓	✓	02/16/02
52			02/16/02
53			02/16/02
54			02/16/02
55			02/16/02
56			02/16/02
57			02/16/02
58			02/16/02
59			02/16/02
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61			02/16/02
62			02/16/02
63			02/16/02
64			02/16/02
65			02/16/02
66			02/16/02
67	✓	✓	✓
68			✓
69			✓
70			✓
71			✓
72			✓
73			✓
74		✓	✓
75			✓
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Claim	Final	Original	Date
101			02/16/02
102			02/16/02
103			02/16/02
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107			02/16/02
108			02/16/02
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110			02/16/02
111			02/16/02
112			02/16/02
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114			02/16/02
115			02/16/02
116			02/16/02
117			✓
118			✓
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If more than 150 claims or 10 actions  
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Best Available Copy